Revision: HCFA-PM-87-4

**MARCH 1987** 

(BERC)

OMB No.: 0938-0193

State:

Montana

Citation 435.10 and

435.403, and 1902(b) of the Act, P.L. 99-272

(Section 9529) and P.L. 99-509 (Section 9405)

2.3 Residence

Medicaid is furnished to eligible individuals who are residents of the State under 42 CFR 435.403, regardless of whether or not the individuals maintain the residence permanently or maintain it

at a fixed address.

TN No. 87(10)9 Supersedes TN No. 87(10)1

Approval Date 8/2//87

Effective Date 4/1/87

HCFA ID: 1006P/0010P